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February 14, 2003

TO: Each Supervisor

FROM: Thomas L. Garthwaite, M.D.  
Director and Chief Medical Director

SUBJECT: **BIOTERRORISM ACTION PLAN MONTHLY STATUS REPORT**

As requested by your Board, this is the monthly status report on activities related to the bioterrorism action plan.

**Health Resources and Services Administration (HRSA) Funds—\$3.6 million**

An EMS Agency representative continues to participate on the Statewide HRSA Advisory Committee. Los Angeles has progressed further in implementing the HRSA objectives than the State and is closer to providing direct funding to hospitals. Subsequently, the State Advisory Committee has recommended that the Los Angeles model be used statewide, i.e., type of equipment and funding that will be provided to hospitals.

The Basic and Expanded level hospital agreements approved by your Board last month have been distributed to more than 70 of the 9-1-1 receiving hospitals choosing to participate in the program. Personal Protective Equipment (PPE) and funding for fixed decontamination capability will be forwarded to these hospitals upon the return of signed agreements.

Federal representatives have informally indicated that the new 2003 funding applications and instructions are projected to be distributed in March. The local HRSA Advisory Committee has begun identifying specific areas to target these funds in an effort to better prepare the hospital terrorism/disaster response capacities countywide.

**Centers for Disease Control and Prevention (CDC) Funds—\$24.6 million**

Implementation of the CDC-approved Phase I Pre-Event Smallpox Vaccination Plan is in progress. This is a completely volunteer program. To date, 38 employees from public health departments in Los Angeles have been vaccinated as part of the Public Health Response

Teams which will be required to conduct contact investigations and outbreak control activities, including ring vaccination. The goal is to vaccinate a total of 250 individuals for these teams which will primarily consist of physicians, public health nurses, epidemiologists and laboratory personnel. Additional support personnel to be vaccinated for these teams will include a small number of law enforcement personnel to provide security; the Department's ambulance drivers to provide transportation; and representatives from the Department of Mental Health to provide counseling services.

The largest number of targeted vaccinees in Phase I are the health care workers at local hospitals who would be called upon to treat and manage initial smallpox cases. Of the 84 hospitals (including Veteran's Administration hospitals) which have been offered the opportunity to participate in the program, 13 hospitals have provided names of volunteer vaccinees – all totaling more than 300 individuals. An additional thirteen hospitals have informed the Department that they will not participate at this time. The remaining hospitals are in the decision-making and education processes or are identifying volunteers that do not have specified contraindications. This includes the four County hospitals with 9-1-1 receiving capabilities which, as a County hospital system, will all participate in this volunteer program.

Overall, the implementation of the vaccination program has progressed more slowly than might have been expected. However, the experience in Los Angeles is similar to that of the entire nation. Despite the liability protections offered by Section 304 of the Homeland Security Act, hospitals continue to have many questions regarding liability, employee time off for illness resulting from vaccination, and potential impact on daily operations. Additionally, dissemination of appropriate educational materials to potential vaccinees and pre-screening activities necessary to identify the appropriate volunteer vaccinee population has been slow to progress. Vaccinations of hospital teams are projected to begin the last week of February.

Similar to the HRSA funding, Federal representatives have indicated that the new 2003 funding applications and instructions will be distributed in March.

As requested, your Board will continue to be provided with monthly updates on these grants and terrorism preparedness activities. The Department continues to work with the CAO to ensure that grant funding is obtained and maximized properly. Please let me know if you have any questions.

TLG:vph  
203:006 and C/R 111:005

c: Chief Administrative Officer  
County Counsel  
Executive Officer, Board of Supervisors  
Director, EMS Agency  
Director of Public Health  
Fiscal Management